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Bib Data Sheet

CONFIRMATION NO. 5101

SERIAL NUMBER 10/675,069	FILING OR 371(c) DATE 09/30/2003 RULE	CLASS 128	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 03104.0303
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APPLICANTS

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

12/23/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SC	SHEETS DRAWING 1	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u> </u> Examiner's Signature <u> </u> Initials				

ADDRESS

26799

TITLE

AUTOMATIC TRANSFER REGULATOR FOR HOSE-LINE RESPIRATOR

FILING FEE RECEIVED 1342	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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